

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Friends of Dave Joyce

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 Spring Hill Road

Date of Disbursement

M M	D D	Y Y Y Y
03	23	2015

City	State	Zip Code
Tysons Corner	VA	22182-2245

Amount of Each Disbursement this Period

82.67

Purpose of Disbursement
SERVICE CHARGES

001

Transaction ID : B-E-6041

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For:
	Senate	
	President	
		<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B. Aristotle

Mailing Address 205 Pennsylvania Avenue SE

Date of Disbursement

M M	D D	Y Y Y Y
03	24	2015

City	State	Zip Code
Washington	DC	20003-1164

Amount of Each Disbursement this Period

600

Purpose of Disbursement
REPORTING SOFTWARE

001

Transaction ID : B-E-6070

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For:
	Senate	
	President	
		<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

c. Bogart Associates, Inc.

Mailing Address 1200 Trinity Drive

Date of Disbursement

M M	D D	Y Y Y Y
03	24	2015

City	State	Zip Code
Alexandria	VA	22314-4724

Amount of Each Disbursement this Period

3500

Purpose of Disbursement
FUNDRAISING CONSULTANT

001

Transaction ID : B-E-6050

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For:
	Senate	
	President	
		<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4182.67